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STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS

for LOBBYISTS (RSA Chapter 15)

RECEIVED

JUL 2 6 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

| 1. Name of Lobbyist(s) Jim Bouley Alex Kautroubas |
|--|
| II. Name of lobbyist's partnership, firm or corporation, if any: |
| Donnahu & Raylow LLC |
| (Name of partnership, firm or corporation) |
| 17 Noort St. #3 Concord NH 03301 |
| Business Address: (Street) (Town/City) (State) (Zip Code) |
| (6B) 228-1601 ()e-mail |
| III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). |
| All reportable transactions occurring in the months prior to the reporting date relative to the following client: |
| Community Support Network Inc. (Full Name of Client ak it appears on the Lobbyist Registration Form) |
| OR |
| ☐ All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. |
| IV. Date of Report April 25, 2018 Reports cover: activity from date of registration to 3/31/18 activity from 4/1/18 to 6/30/18 |
| October 31, 2018 |
| activity from 7/1/18 to 9/30/18 activity from 10/1/18 to 12/31/18 |
| V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301. |
| VI. Check if additional reports are attached: |
| If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses |
| If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or |
| Expense Reimbursement If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions |
| 1. 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, |
| Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. |
| (Signature of lobbyist) |
| (Print Name of lobbyist) |

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STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

| I. Name of Lobbyist(s) Jim Bouley | Alex Kontroubas |
|---|---|
| II. Name of lobbyist's partnership, firm or corporati | on, if any: |
| (Name of partnership, firm or corporation) | 111 |
| III. Name of Client Community Support | |
| IV. Fees Received Indicate the gross amount of all fees received from the clien to lobbying, including fees for services such as public advo including research, monitoring legislation, and related leg- reduced by any expenses: | cacy, government relations, or public relations service al work. The gross fee amount reported shall not b |
| a) Total of all fees received in this reporting period | a) \$ 7500.00 |
| b) Total of all fees received this calendar year, prior to this (This should equal the total of all prior monthly reports | |
| c) Total of all fees received to date (Add lines a and b) | 0)\$ 17,500-00 |
| d) Indicate the amount of any such fees that are due, but have yet been paid | d) \$ |
| V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations at fees. Separate reports are to be filed for expenditures made the lobbyist(s)/firm that are unrelated to any one client a Expenses are to be reported in one of three categories of during the reporting period for salaries, benefits, support s individual expenses where the expenditure was of \$25.00 or lunch where the cost was \$25.00 or less, purchase of a pen being lobbied, purchase of a ceremonial object given to a per (c) an itemized statement of each individual expenditure made any purpose not covered by (a) (for example: purchase of ceremonial object to be given to the subject of lobbying we restaurant expenses for a legislative reception). Expenses contributions will be reported on separate addendums and she | e relative to each client and if expenditures are made by separate report may be filed for the lobbyist(s)/firm expenses: (a) the aggregate total of all expenses paintaff, and office expenses; (b) the aggregate total of all expenses paintaff, and office expenses; (b) the aggregate total of all expenses with a value of less than \$10 that is given to the person being lobbied with a value of \$25.00 or less); and de during this reporting period of greater than \$25.00 for a meal with value of greater than \$25, purchase of with a value greater than \$25, but not greater than \$50 for honorariums, expense reimbursement, or political |
| a) Total aggregate expenses for this reporting period for sala support staff, and office expenses, related directly or indirect | ly to lobbying. a) \$ |
| b) Total aggregate of expenditures during this reporting perina), of \$25 or less. | od, not reported b) \$ |
| c) Total of all itemized expenditures reported in detail in sec | ction VI. c) \$ |

| d) Total expenses for this reporting period (Add lines a, b and c) | d) \$ |
|--|--------------------------------|
| e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) | e) \$ |
| f) Total of all expenses year to date | 0\$ |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged. | |
| Paid to: | Amount: |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | |
| Sworn Statement/Affirmation by Lobbyist | |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief. | that the foregoing information |
| (Signature of lobbyist) | 07/24/18 |
| (Signature of 1000yist) | (Date) |
| (Print Name of lobbyist) | |

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

| Sworn Statement/Affirmation by Lobbyist |
|---|
| Statement of Income and Expenses for: |
| Name of Lobbying partnership, firm, or corporation: Dennehy & Bouley LU |
| Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any |
| particular client): Community Support Network Inc. |
| Date of Report (check one): |
| April 25, 2018 |
| I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted): |
| Addendum A(s). |
| Addendum B(s). |
| Addendum C(s). |
| • |
| I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. |
| alle fler on on our |
| (Signature of lobbyist) (Date) |
| Alex Koutroubas |
| (Print Name of lobbyist) |